



Department of Public Health and Human Services


Director's Office ♦ PO Box 4210 ♦ Helena, MT 59620 ♦ (406) 444-5622 ♦ Fax: (406) 444-1970 ♦ www.dphhs.mt.gov

Steve Bullock, Governor

Richard H. Opper,
Director

Date: December 29, 2015

To: Montana Health Coalition

From: Mary E. Dalton, State Medicaid Director 

Subject: Montana Medicaid Waiver and State Plan Amendments

On or before December 31, 2015, the Montana Department of Public Health and Human Services (DPHHS) will submit a Section 1115 Basic Medicaid Waiver amendment for approval to the Centers for Medicare and Medicaid Services (CMS) with a proposed effective date of February 1, 2016. This amendment will add the Aged, Blind, and Disabled (ABD) population in order to waive the dental treatment services annual cap of \$1,125. Covered services, excluding diagnostic, preventive, denture and anesthesia services for adults age 21 and over are subject to an annual cap of \$1,125 per benefit year. The estimated total annual state and federal impact for the ABD population over the \$1,125 cap of this amendment for State Fiscal Year (SFY) 2016 is \$1,014,445; and \$2,028,889 for SFY 2017. Public comments on the Basic Medicaid Waiver Amendment may be submitted until January 27, 2016, by e-mail to mlemieux2@mt.gov or by mail to: DPHHS, Attn: Mary LeMieux, PO Box 202951, Helena, MT 59620-2951.

On or before January 31, 2016, DPHHS will submit a new Section 1932 Primary and Enhanced Care Case Management Programs State Plan amendment to CMS with a proposed effective date of February 1, 2016. The amendment will add the Health and Economic Livelihood Partnership (HELP) Plan new adult population to the state and federal authority for Passport to Health, Health Improvement, Team Care, and the Nurse Line care management programs. The new adult population receiving coverage through the Medicaid State Plan Standard benefit will be eligible for all DPHHS care management programs. The estimated total annual state and federal impact for the new adult population's care management per member per month fees is \$325,866 for SFY 2016 and \$944,664 for SFY 2017. Public comments on the Primary and Enhanced Care Case Management Programs amendment may be submitted until January 27, 2016, by e-mail to asark@mt.gov or by mail to: DPHHS, Attn: Amber Sark, PO Box 202951, Helena, MT 59620-2951.

On or before January 31, 2016, DPHHS will submit a 1932 Patient Centered Medical Home (PCMH) State Plan amendment to CMS to add the HELP Plan population, effective January 1, 2016. These new adults who are exempt from Third Party Administrator (TPA) enrollment, such as medically frail and those who require continuity of coverage that is not available or could not be effectively delivered through the TPA,

will receive their healthcare from the Aligned Standard State Plan Alternative Benefit Plan (ABP). This includes the option of having a PCMH. The estimated total annual state and federal impact to add the new adults to the Medicaid State Plan PCMH Program is \$14,400 for State Fiscal Year (SFY) 2016 and \$41,736 for SFY 2017. Public comments on the PCMH Program amendment may be submitted until January 27, 2016, by e-mail to kgobbs@mt.gov or by mail to: DPHHS, Attn: Kelley Gobbs, PO Box 202951, Helena, MT 59620-2951.

DPHHS is providing the Montana Health Coalition with notice of ABP for: (1) the HELP Plan; and (2) Aligned Standard State Plan. On April 29, 2015, Governor Steve Bullock signed into law Senate Bill 405, an Act establishing the Montana HELP Plan to expand health coverage in Montana to an estimated 70,000 new adults with incomes up to 138 percent of the Federal Poverty Level (FPL). Montana contracted with Blue Cross and Blue Shield of Montana (BCBSMT), a TPA, to administer the delivery of, and payment for, most healthcare services through the TPA ABP for most new adults. Those new adults who are exempt from TPA enrollment, such as medically frail and those who require continuity of coverage that is not available or could not be effectively delivered through the TPA, will receive their healthcare from the Aligned Standard State Plan ABP. Both ABPs include the 10 Essential Health Benefits as required by the Affordable Care Act, which are: ambulatory patient services; emergency services; hospitalization; pregnancy, maternity, and newborn care; mental health and substance use disorder services; prescription drugs; rehabilitative and habilitative services and devices; laboratory services; preventive and wellness services; and pediatric services. Additional benefits include: vision, dental, hearing aids, transportation, Diabetes Prevention Program, prescription drugs, and services at Indian Health Service, Federally Qualified Health Clinics, and Rural Health Clinics. The estimated total annual state and federal impact for the new adult benefits is \$159,896,353. Public comments on the ABP benefit plans amendment may be submitted until January 27, 2016, by e-mail to RCorbett@mt.gov or by mail to: DPHHS, Attn: Rebecca Corbett, PO Box 202951, Helena, MT 59620-2951.

All of these changes are related to the expansion of Medicaid. The change to the dental benefit package will ensure that people who are aged, blind or disabled will receive the same package of dental benefits that they now receive. Other people on Medicaid (parents or adults covered through expansion) will be subject to an annual cap of \$1,125.

As a coalition member, please copy Mary Eve Kulawik at mkulawik@mt.gov if you have any questions or concerns about any of these amendments.

It has been an extremely productive last few months, and we are looking forward to beginning coverage under Medicaid expansion on January 1, 2016.

Thank you for your continued commitment to the Medicaid program.